BLS Curriculum Update Committee
OEMS Technology Park Office - Richmond, Virginia
August 28, 2008
10:00am

Members Present:	Members Absent:	Staff:	Others:
Linda Johnson-Chair	Rob Phillips	Greg Neiman	Teresa Ashcraft
Pat Mercer	Theresa Kingsly	Chad Blosser	
Debbie Akers	Shaun Carpenter	Warren Short	
Diana "Cookie" Conrad-Excused	David Morris		
Ray George	Russell Barnes		
Jay Porter	VAGEMSA Rep		
Tracey Jarrett			
Carla Mann			

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	The meeting was called to order at 10:45am	
II. Introductions	Introductions were not necessary	
III. Approval of Agenda	The Committee reviewed the DRAFT Agenda (**Attached**)	**Approved by General Consent**
IV. Approval of Minutes	The Committee reviewed the DRAFT May 7, 2008 Minutes and the minutes of the June 26 and July 28 work sessions. (**ATTACHMENT: A**)	**Approved by General Consent with correction**
V. Discussion of Virginia Competency Based BLS Education Approval Policies and Procedures	The Committee discussed reviewed the proposed changes to the document. They stopped at Item V. C. (**ATTACHMENT: B**)	
VI. Assignments for Next Meeting	Greg will send out the document as edited so far. The committee will edit the document using comments and track changes and send it back to Greg NLT October 1, 2008	
VII. Establish Next Meeting Date	The September 30th meeting was rescheduled for October 7, 2008. 10am-2pm	
IX. Adjourn	The meeting was adjourned at 2pm	

BLS Curriculum Update Committee
Thursday, August 28, 2008 – 10:00am
Location: OEMS Technology Park Office
Agenda

I.   Welcome

II.   Introductions

III.   Approval of Agenda

IV.   Approval of Minutes from May 7, 2008

V.   Discuss Changes to BLS Accreditation Document

VI.   Assignments for Next Meeting

VII.   Establish Next Meeting Date

VIII.   Adjourn

August 28, 2008 Minutes of the BLS Curriculum Update Committee

ATTACHMENT: A
Approved May 7, 2008 Minutes of the BLS Curriculum Update Committee

BLS Curriculum Update Committee
Marriott West – Innsbrook Richmond, Virginia
May 7, 2008
10:00am

Members Present:	Members Absent:	Staff:	Others:
Linda Johnson-Chair	Rob Phillips	Greg Neiman	Teresa Ashcraft
Debbie Akers	Russell Barnes		
Pat Mercer	David Morris		
Shaun Carpenter	Theresa Kingsly-Excused		
Jay Porter	Tracey Jarrett		
Diana "Cookie" Conrad	Carla Mann		
Ray George			

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	The meeting was called to order at 10:55am	
II. Introductions	Members of the Committee and Guests introduced themselves	
III. Approval of Agenda	The Committee reviewed the DRAFT Agenda. (**Attached**)	**Approved by general consent**
IV. Approval of Minutes	The Committee reviewed the Minutes of the February 21, 2008 meeting. (**ATTACHMENT: A**)	**Approved by general consent**
V. Discussion of DRAFT 3.0 of Education Standards	The Committee discussed the DRAFT 3.0 of the Education Standards. (**www.nemses.org**) Committee members will download and review the document and forward any comments to Greg Neiman no later than May 20, 2008	
VI. Discussion of Virginia Competency Based BLS Education Approval Policies and Procedures	The Committee discussed the document (**ATTACHMENT: B**). Due to the lateness of the hour, Committee Members were to review an electronic version and make recommendations by the next meeting.	
VII. Assignments for Next Meeting	Review 3.0 Education Standards Document and forward any comments to Greg Neiman NLT May 20, 2008	

August 28, 2008 Minutes of the BLS Curriculum Update Committee – ATTACHMENT: A

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	Greg Neiman will send an unprotected word version of the BLS Accreditation Document Review and make changes using track changes in word and return the electronic version to Greg Neiman NLT June 12, 2008	
VIII. Establish Next Meeting Date	Thursday, June 26, 2008 10:00am. Location TBA.	
IX. Adjourn	The meeting was adjourned at 2:00pm	

BLS Curriculum Update Committee
Wednesday, May 7, 2008 – 10:00am
Location: Marriott West - Richmond
Agenda

I.   Welcome

II.   Introductions

III. Approval of Agenda

IV.   Approval of Minutes from February 21, 2008

V.   Discuss Draft 3.0 of Education Standards

VI.   Discuss Accreditation Document

VII. Assignments for Next Meeting

VIII. Establish Next Meeting Date

IX.   Adjourn

August 28, 2008 Minutes of the
BLS Curriculum Update Committee

ATTACHMENT: B
Accreditation of BLS Competency Programs
Document - DRAFT

VIRGINIA COMPETENCY-BASED BASIC LIFE SUPPORT EDUCATION APPROVAL POLICIES AND PROCEDURES

TABLE OF CONTENTS

Office of Emergency Medical Services
Virginia Department of Health
James Madison Building Suite UB-55
109 Governor Street
Richmond, VA 23219

Telephone number: 804-864-7600
Fax number: 804-864-7580

I. INTRODUCTION

In compliance with 12 VAC 5-31, the Virginia Office of Emergency Medical Services (OEMS) has been delegated the authority by the State Board of Health to develop, implement and administer BLS programs in the Commonwealth.

The Educational Approval and Policies and Procedures set forth in this manual have been developed as an alternative to current Basic Life Support training polices and procedures. This approval process is voluntary for all Basic Life Support (BLS) education programs who wish to participate and conduct a competency-based BLS training program for personnel gaining certification as a BLS provider in the Commonwealth of Virginia. The purpose of this alternative approval program for BLS education programs is to ensure quality and consistent minimum standards in the delivery of these education programs on a statewide basis.

In an effort to achieve this, the primary goal established is to ensure that all Virginia BLS education programs meet the standards of quality outlined by the Office in this manual. A secondary goal established is to assist all existing and future BLS education programs conducted in Virginia in meeting the standards detailed in the regulations.

In an effort to best achieve the second goal, this manual has been developed to outline the procedures required to achieve State education program approval. It will assist education program administrators/coordinators in the preparation of information necessary to justify approval.

It is also important for BLS education programs to receive the recognition of their efforts in providing quality education and training for BLS providers in the Commonwealth. Being awarded approval signifies that the education program meets the high standards set forth by peers and EMS professionals across the State.

~~State accredited ALS education programs are approved to offer BLS courses and do not need to apply for BLS Competency-based Education Program Approval status.~~ BLS Programs working under ALS accredited sites should still be able to be accredited for recognition and quality assurance.

> **Comment [GSN1]:** The Committee feels that an application should be required in order for currently Accredited ALS Programs to begin doing competency based EMT-B Programs.

II. APPLICATION PROCESS

1. An Application Form shall be provided by OEMS (Attachment A). The Application for BLS Competency-based Education Program Approval shall be completed in its entirety and submitted to the Office of Emergency Medical Services Division of Educational Development by one of the two designated deadlines.

     Application Deadlines

     1-A. Application for BLS Competency-based Education Program Approval shall be received at least ~~six (6)~~ (3) three months before the first competency-based course begins.

> **Comment [GSN2]:** This should be kept at 6 months

2. The completed Application for BLS Competency-based Education Program Approval with attachments must be submitted to:

> Office of Emergency Medical Services
> Virginia Department of Health
> James Madison Building Suite UB-55
> 109 Governor Street
> Richmond, VA 23219
>
> Attn: Chad Blosser

3. BLS education programs accredited by the Commission on Approval of Allied Health Education Programs (CAAHEP) applying for Virginia approval shall submit the following documents:

> 3-1. A copy of the Site Visit Report submitted to the JRCEMT-P by CAAHEAP.
>
> 3-2. A copy of the letter awarding accreditation from the Joint Review Committee on Education Programs for the EMT-P (JRCEMT-P) must be attached.
>
> 3-3. Any portion of the Virginia BLS Competency-based Education Program Approval application that is not duplicated in the CAAHEP accreditation process.

4. The completed Application Form for BLS Competency-based Education Program Approval must be accompanied by two (2) attachments.

> A. A cover letter, written on the agency/institution letterhead responsible for conducting/supporting the educational program, must be attached, requesting program approval. The letter must confirm continued support for the BLS Competency-based education program during the five-(5) year approval period.
>
> B. Three (3) copies of the Self Assessment Document shall be attached to the Application for BLS Competency-based Education Program Approval.

5. A letter from OEMS acknowledging receipt of the Application for BLS Competency-based Education Program Approval shall be sent to the requesting agency/institution.

III. SELF ASSESSMENT STUDY DOCUMENT

1. The Self Assessment Study Document provides each BLS education program with an opportunity to assess their objectives and degree of compliance with BLS education approval program standards set forth in the Training Programs Administration Manual and 12 VAC 5-31. This evaluation should be comprehensive and clearly identify the program's strengths and limitations.

2. Each BLS education program is expected to complete the Self Assessment Study document accurately and thoroughly.

3. Completion of the Self Assessment Study Document should involve the entire BLS program staff. This is to include but not limited to the program medical director, administrator/coordinator, BLS administrative staff, BLS faculty, EMT students, and others in the health care delivery system involved in the BLS educational program.

4. The Self Assessment Study document and attachments will be reviewed by OEMS and if the program appears to be in compliance with standards, a site visit will be scheduled.

5. The format for the Self Assessment Study is depicted in Attachment B.

   A. Content of Self Assessment Study Document

     1. Begin with an overview of BLS education program to include a brief statement regarding the development of program, target students, and communities of interest served by the BLS providers. Also addressed should be any special considerations impacting program delivery such as financial constraints, availability of clinical facilities, etc. This portion should not exceed two (2) pages in length.

     2. Identify agencies/institutions responsible for the oversight of the BLS education program.

     3. Each BLS education program shall have a written statement of the program's goals, consistent with the sponsoring agency/institution's mission statement and the needs of the community. They shall serve as a guide for developing, implementing, and evaluating the educational program. A copy of the program's goals should be included in the self-assessment study document.

     4. The BLS education program shall have defined the educational goals and competencies for each program delivered [FR or EMT-B]. The goals shall be clearly stated, measurable, and attainable. They shall serve as the foundation for developing, implementing, and evaluating the educational program and shall identify the expected competencies of students completing the program.

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Comment [DTA3]: Do we envision this Attachment to be identical to the ALS application? My concern is we are going to discourage agencies, etc. from applying to become accredited because the belief is that this document is too cumbersome and evasive and many aren't willing to tackle that process.

Comment [GSN4]: Is this too nebulous?

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Comment [DTA5]: With the curricula on the way out do we want to change the wording here? Or do we leave it as is until we know what the educational materials will be for our future EMS classes?

Comment [GSN6]: Consider listing some minimum items that should be listed as part of the program goals i.e % of students passing the class, % certified vs enrollment.

Deleted: Objectives are divided into the three domains in education: cognitive, psychomotor and affective. The curricula, as approved by OEMS, should be referenced in the self assessment study document

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5. BLS education programs are delivered utilizing a variety of schedules to meet the needs of the student population served and the agency/institution. A copy of the course syllabus for each different program/class i.e. FR and EMT-B shall be attached to the self-assessment study document.

6. Resource availability is a crucial part of any BLS education program. These resources include administrative personnel, financial support, faculty/staff, teaching facilities, and available clinical and field experiences. Medical guidance of the program is an essential component. The Self Assessment Study Document should contain the following information/attachments for the programs resources.

    A. Organization of Personnel

        A-1.   Attach a copy of the organizational chart that shows the relationship among students, faculty, medical director, program coordinator and other personnel for each course (which shall demonstrate the relationship of the program and it's staff to the sponsoring agency/organization.) The lines of authority, responsibility and communications shall be clearly indicated.

        Need format for organizational chart to standardize

        A-2.   Program job titles, all full-time, part-time and volunteer positions, shall be included with a position description of each. The names of individuals holding these job titles shall also be listed ~~when available~~.

    B. Medical Director

Each program shall have a Medical Director who shall <u>oversee</u> the educational content and field internship experiences of the program. He/She shall ensure the content and the quality meet required standards.

        <u>B-1. Attach the medical director's job description, duties, and responsibilities in his/her role in the BLS education program.</u>

        B-1.   ~~Include a schedule representative of the medical director's participation in the program~~

        B-2.   ~~Describe how the medical director ensures attainment of required competencies by each student~~ Would this not be the same as B2

        <u>B-3.</u>   Include a copy of the medical director's curriculum vitae

    C. Program Director

Each BLS education program shall have a program <u>director</u> to manage the overall aspects of the BLS education program.

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Comment [GSN7]: Don't want to template this process

Comment [GSN8]: del

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Deleted: <#>Describe the role the medical director plays in the BLS education program. ¶

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Comment [GSN9]: and/or their designee

Comment [GSN10]: keep with changes

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Comment [GSN12]: Director

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C-1.   The program director ensures the success of the educational program. He/She is responsible for the organization, administration, evaluation, continued development and effectiveness of the educational program. He/She is the only person who can announce courses to the Office of EMS for the program.

C-2.   Attach a copy of the program director's curriculum vitae which substantiates that the individual is certified as an EMT Instructor or ALS Coordinator or EMS Education Coordinator with experience instructing and evaluating EMS students, and experience with administration of educational programs. The director shall demonstrate knowledge of 12 VAC5-31, the Training Program Administration Manual and of the issues currently impacting the prehospital care provider.

D. Instructors

D-1.   The FR or EMT course shall be taught by an EMS provider who is certified at the EMT level or higher or by a person who is knowledgeable in the subject matter being instructed. The Instructor shall work with the program director in preparation and delivery of the course content.

E. Clinical/Field Coordinator

E-1.   The Clinical/Field Coordinator may be designated by the program. They are responsible for oversight and coordination of the Clinical/Field Components of the FR and/or EMT course. In smaller programs this function may be met by the program director.

F. Preceptors

F-1.   Preceptors for clinical and/or field rotations will be designated by the program and approved by the program Medical Director. The preceptor must be certified at or above the level of the certification being sought by the student.

G. Financial Support Sources for Program

Financial support for many of the BLS education programs comes from a variety of sources. These may include but not be limited to the local jurisdiction, volunteer organization, EMS Training Funds (EMSTF) or a combination of the above. Within the application, the BLS education program shall present a budget disclosing expected expenses and the sources of revenue that will support the program.

H. Instructional Facilities

Each program shall maintain facilities adequate for presentation of didactic, skill instruction and practice sessions. Medical sharps and drugs shall be stored in a secured area.   A secure record storage area must be used for student and program files. The application shall:

H-1. Indicate the maximum number of students that can be accepted into the program. If there is a minimum number of students required to conduct the program, that number shall also be included in this section.

H-2. Describe the classrooms to include location, student capacity, labs, instructional materials, and BLS education equipment utilized in the program.   Describe how the skills laboratory is utilized in the curriculum.

I. Students

Students' success in the BLS education programs is dependent upon many factors some of which are not under the students' control. Each student deserves a fair opportunity to succeed.

I-1. Describe criteria for student selection.

I-2. Attach a copy of any information packet provided to students accepted into the BLS education program.

I-3. Describe any resources available to assist students with problems encountered during the BLS education program. These problems may be related to educational difficulties, skill performance problems, or behavioral problems. If resources are unavailable, explain how these problems are managed.

I-4. Describe all measures used to promote student progress and success such as tutoring capabilities, remedial training, and self study computer programs, as examples.

I-5. Describe how the program measures student progress in the course. Include which evaluation tools are used and how they are weighted.

I-6. Indicate the manner and frequency in which student performance feedback is provided. Include the forms used for student action plans and student counseling.

I-7. Describe or attach policies and procedures, which define conditions and the process used for dismissal of students from the program;

I-8. Describe the appeal process students may use to request a review of evaluations or disciplinary actions;

I-9. Describe how the student records are maintained which ensures their confidentiality.

I-10. Describe how students are identified in the field internship areas.

I-11.   Describe Americans with Disabilities Act (ADA) policies as they relate to the program.

J   Program evaluation

Each program, in an effort to continuously improve the quality of the BLS education delivered, shall have a written policy and procedure for evaluation of the BLS education program. Evaluation shall be done annually and provide written objective evidence that the program is meeting its objectives and the changing needs of EMS care. Input should be gathered from students as well as faculty members.

J-1.   Attach copies of program evaluation tools used by both student and faculty members to provide feedback about the program.

J-2.   Include a report analyzing the evaluation results data on the effectiveness of:
   a. Program
   b. Resources
   c. Responsiveness to recommendations to change
   d. Faculty
   e. Students ability to function as entry-level providers upon successful completion of the BLS course

J-3.   Describe methods developed to improve weak areas identified and indicate if changes initiated.

K   Satellite BLS education programs provisions

There may be instances where BLS education programs are conducted by approved programs but at a different location and/or for another agency/institution.

K-1.   Parent BLS education program must have received full accreditation.

K-2.   The satellite BLS education program must operate under the parent program's approval.

K-3.   The BLS education program shall be conducted in the same fashion as the parent program.

K-4.   Faculty of the satellite BLS education program must have their credentials on file with the parent BLS education program. Faculty members must meet the same education, experience and preparation requirements.

K-5.   Classroom and lab facilities utilized for didactic and clinical

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Comment [DTA19]: I love the concept of Satellite BLS locations without requiring another site study. Is the one year wait going to be detrimental to any programs/councils that offer EMT-B education? Hopefully they would adopt the ideals of the competency based education in the program(s) that would have to wait for the full accreditation to take place of the parent education program.

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instruction at the satellite program shall meet the same requirements as listed in Section H.

IV. Site Visit

A visit to the BLS education program site shall be conducted, at a mutually convenient time, to observe the BLS education conducted by the program.

A. The time frame for site visit shall be planned for a one (1) day visit. During the site visit, the didactic and field BLS educational sites may be visited and evaluated. The didactic and field preceptors and students may be interviewed.

A-1. Schedule of site visit- A suggested schedule for activities during the site visit has been developed. If there are valid reasons why the schedule should be changed at the request of the BLS education program or the site visit team, this must be arranged prior to the arrival of the site visit team. This is a very ambitious schedule and the cooperation of the BLS education program and its personnel is essential if the activities are to be completed within the one (1) day time frame. The schedule for the site visit may be determined by the Self Assessment Document.

Suggested schedule may include:

8:00 am

Meet with Program Director and Administrative Staff
  - o The site visit team members will briefly review the approval process, implication of status assigned, and function of site visit.
  - o It may be necessary to get additional information on educational philosophies, operational procedures, curriculum content and sequence delivery of the BLS education program

9:00 am

Meet with Medical Director
  - o The site visit team may need to clarify or assess the level of medical involvement and accountability in all phases of BLS education program.

10:00 am

Meet with Instructors responsible for Didactic Instruction

- o The site visit team may need to obtain additional or clarify information on course content, teaching strategies utilized, and testing mechanisms. At this time an exchange of ideas between site visit team and faculty may occur to introduce new ideas/techniques for possible use in improving the program delivery

11:00 am

Meet with Students currently in BLS Education Program

- o The site visit team will meet with a representative group of students to assess student reactions to BLS education program, the student's perception of their responsibilities and how their role changes once they complete the certification process.

12:00 - 1:30 pm

Working Lunch

- o The site visit team shall review the BLS education program records, student files/records, course records, and testing records. They shall also review the written and practical evaluation tools used to determine students' success or failure in the program.
- o A review of how the program maintains all academic records will also be done.

1:30 - 3:30 pm

Visit to Clinical/Field Internship Sites, Interview Clinical/Field Training Preceptors

- o Members of the site visit team will want to assess the general quality of the clinical teaching environment, and general resources available in the field internship sites. They will also want to interview some of the faculty providing the supervised practice of students.

4:00 - 4:30 pm

Final Meeting with Program Director

- o The members of the site visit team will again meet with the program director to answer any final questions the site visit team may have regarding the program or administration.
- o Collect Site Visit Evaluation Form from program

representative

4:30 - 5:30 pm

Site Visit Team Meeting
- The members of the site visit team will meet to complete their site visit reports and come to a consensus on the recommendation regarding the accreditation status to be recommended to OEMS. The BLS education program is requested to provide a secure meeting place for the team to meet.

V. Composition of Site Visit Team

The Site Visit Team shall be composed of persons with demonstrated expertise in the areas of BLS education, program administration, and Medical Direction. After a careful review of the Self Assessment Documentation and other information submitted by the program, they shall visit the program to clarify any questions and see the resources utilized by the program.

A. The Site Visit Team shall consist of an OEMS Representative and two (2) additional members represented by any of the following:
   1. A system medical director or a BLS education program medical director;
   2. BLS faculty or program director of an Accredited Program
   3. Others as necessary, designated by the Office of EMS

B. Criteria for site team
   Site visit team members must have a working knowledge of BLS education.

   B-1. The Medical Director may be an Operational or a Program Medical Director. The Medical Director for the BLS Educational Program may not serve as a member of the site visit team for a program under his/her supervision.   (The Medical Director must have at least 3 years experience as a Medical Director)

   B-2. The BLS program director or faculty member must have a minimum of 2 years experience or equivalent education.

   B-3. The OEMS designated representative must have a minimum of 2 years experience in EMS education/program administration or the equivalent educational preparation.

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Deleted: The OEMS representative shall serve as team leader organizing the site visit and creating the final recommendation report for submission to the Governor's EMS Advisory Board through the Professional Development and Medical Direction committees. The other site visit team members will consist of one each of the following:

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Deleted: <#> or BLS faculty member;¶

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B-4.   The OEMS representative will be responsible for arranging the site visit.

C. Selection Process for Site Visit Team Members

Site Visit Team members shall be selected from a qualified group of BLS Program Directors or faculty members and Medical Directors. Individuals meeting the minimum requirements interested in serving on the site visit team shall notify OEMS in writing of their interest.

C-1.   Site Visit Team members will be selected by OEMS and subject to their availability from their primary program commitments. Team members shall indicate any potential conflicts with serving on the site visit team to OEMS representative when initially requested to serve.

C-2.   If an applicant can demonstrate in writing a reasonable basis for concern, OEMS shall consider allegations that conflicts of interest exist between a site reviewer and an applicant.

D. Length of visit at BLS education program

The site visit team plan to spend one (1) day evaluating the program but this may be extended, if necessary, in order to adequately evaluate program resources. This would occur only in unusual circumstances and upon mutual agreement between the host program coordinator and team leader.

E. Personnel interviews to be conducted during site visit

Program Director/Course Coordinators shall arrange for interviews with the following program personnel during the site team visit:

1. Program Coordinator
2. Medical Director
3. Current students
4. ~~Field Training Coaches~~ Clinical Coordinator
5. Instructors
6. Others as requested by the review team

F. Review of BLS Education Program Files

Program Directors/Course Coordinators shall arrange for site visit team to review

the following program files:

1. Instructor files
2. Student BLS education records
3. Counseling procedures and records
4. Testing procedures utilized
5. Methods of test development
6. Validation procedures used for tests/questions
7. All written and practical exams
8. Test security procedures
9. Attendance records and requirements
10. Clinical Experience Agreements/Contracts

G. BLS Education Program Facilities

Site visit team shall be permitted to see and examine the following program facilities:

1. Classrooms used for presentation of didactic material
2. Equipment available for skills BLS education and practice
3. Laboratory availability for skills development

H. Confidentiality of information gathered during site visit and included in report.

All information collected by persons involved in the approval process shall be maintained with highest confidentiality. All printed materials such as the application, self-assessment document and site visit report will be read only by the site visit team, Approval Program processing staff, Governor's EMS Advisory Board members if necessary, and other authorized persons.

I. Site visit report

During the site visit each team member shall complete a report of his or her findings. These reports shall be completed at the end of the site visit and submitted to the OEMS representative. A consensus Site Review Team Report will be developed with a recommendation in regard to Approval status and submitted to OEMS. A copy of the Site Visit Report Form is attached. See Attachment D

The program director/course coordinator of program being evaluated shall complete an Evaluation of the Site Visit. This shall be submitted to the Site Visit Team leader at the completion of the visit. A copy of the Evaluation Form is attached. See Attachment E

Comment [DTA22]: Again would like to see this attachment.

I-1. Completion Time Frame

I-2. The final written report of the site team visit will be completed within 30 days of the site visit and submitted to OEMS for approval.

I-3. Submission to the Professional Development and Medical Direction committees at their next regularly scheduled meeting with Recommendation of Approval Status

I-4. The program Application for Approval and Report of Site Team Visit with recommendation for status assignment shall be submitted through the Professional Development and Medical Direction committees to the Governor's EMS Advisory Board for action at the next meeting following the submission of the report

I-5. Report to BLS Education Program On Approval Status

I-6. The BLS education program will be officially notified in writing of the Governor's EMS Advisory Board's decision regarding Approval Status assignment within two (2) weeks of the decision

VI. Categories of Approval

A BLS education program shall be assigned one (1) of the three (3) categories of approval status by OEMS following the application review, site team visit and review of site team visit report.

6-A. Approval 5 -year period

1. This status is assigned when the Application Form for BLS Competency-based Education Program Approval has been submitted and site visit report substantiates that the program meets criteria. An annual written report of BLS educational activities and progress shall be submitted to the Office of Emergency Medical Services Division of Educational Development. CAAHEP accredited programs shall also submit an annual report and updated CAAHEP status (if applicable).

6-B. Provisional Approval - 1-year period

1. This status is assigned when the Application Form for BLS Competency-based Education Program Approval and the site visit report substantiate limitations in meeting criteria which can be resolved within the definite time frame of one (1) year.
   a. The applicant is required to submit a written progress report addressing these limitations to the BLS Education

Approval Program Office at the OEMS semiannually.

    b. A second site visit may be required to verify that all limitations are resolved. If a second site visit is required, a revised Self Assessment Study report addressing all criteria including changes made since initial site visit shall be required prior to conducting the visit.

    c. At the end of the one (1) year provisional accreditation period the Governor's EMS Advisory Board may confer accreditation for the remainder of the five (5) year period if the applicant has satisfied all requirements or deny or revoke approval

  6-C.   Denial or Revocation of Approval

    1. This status is assigned when the Application Form for BLS Competency-based Education Program Approval and the site visit report substantiates that the program/organization is not in compliance with the criteria set forth in 12 VAC 5-31 and the Training Programs Administration Manual. The program shall be notified by mail of the EMS Board's decision.

  6-D.   The Office of Emergency Medical Services reserves the right to visit BLS education programs at any time during the five (5) year approval period to ensure compliance with the standards for approval.

VII. Appeal Policies and Procedures

  A. Appeal Procedure

    A-1. An applicant program may contest an adverse decision by the Governor's EMS Advisory Board with regard to the approval status assigned. A written notice of appeal must be directed to the Governor's EMS Executive Committee and submitted to the Office of Emergency Medical Services Division of Educational Development within fifteen (15) days after receipt of written notification of the Governor's EMS Advisory Board's decision. The request must include reasons and documentation why the original decision should be revisited. The written appeal must state if the applicant is requesting to present the documentation orally before the Governor's EMS Advisory Board. If the written appeal request is not submitted within the specified time frame of fifteen (15) days, the Governor's EMS Advisory Boards decision stands as final.

    A-2. A person who files an appeal will be granted a hearing before the Executive Committee of the Governor's EMS Advisory Board or, if the Board so elects and notifies the appellant, they may be directed to the Virginia's Administrative Process Act.

  B. Decisions on Appeal

The Governor's EMS Advisory Board may reconsider it's its original decision whether or not an oral argument is presented. If the Governor's EMS Advisory Boards upholds it's its original decision, the applicant may seek judicial review under Virginia's Administrative Process Act.

VIII. Publication of Governor's EMS Advisory Board Decisions on Approval

Programs completing the approval process and status assigned by the Governor's EMS Advisory Board shall be listed in the minutes of the Governor's EMS Advisory Board Meeting and available on the OEMS website.

IX. Site Visit Report

The site visit team will evaluate and report on the following areas of the program during the visit:

-Sponsorship
-Resources
-Curricula
-Medical Direction
-Instructors
-Financial Support
-Facilities
-Students
-Record and Reports
-Clinical Resources
-Field Internship
-Evaluation

X. Annual report

A. Each accredited BLS education program must submit to the Division of Educational Development at the OEMS a report of BLS educational activities conducted during the past year. The report shall be submitted by the end of the academic year, July 30th of each year.

A-1. Contents of Annual Report

Forms shall be distributed by the OEMS. The report shall consist of major changes in program that occurred during past year. This includes changes in personnel, clinical or physical resources.

A statistical breakdown of the students involved in the program should include: numbers of students accepted into BLS education program, dropped and reason dropped, failed, completed course, successfully completed State exam, failed, areas of failure, retest results, and types of remediation provided.

XI. Requirements for Maintaining Approval

All agencies/institutions conducting BLS education programs in Virginia are required to comply with the Office of Emergency Medical Services standards, guidelines, and policies in order to maintain approval status including the:

A. Adherence to all BLS Program Standards as approved by the Office of Emergency Medical Services.

B. Advising OEMS within fifteen (15) days, of any changes in personnel directly responsible for the administration/coordination of the program such as the Medical Director or Program Coordinator.

C. Advising OEMS within fifteen (15) days, of any organizational or programmatic changes which adversely affect the approved programs ability to meet the established criteria.

D. Maintenance of an ongoing quality improvement process. We need to define this. Would you like to create a form or take a letter of what is offered…? Like I can tell you what we do but have no proof in black and white.

> **Comment [DTA27]:** Agree with Teresa. How do we want to see documentation of the QA process. If not standardized to apply to all programs, each will utilize their own set of criteria to measure the quality of their program.

E. Conducting a minimum of one (1) BLS competency-based education program every two (2) years.

F. Maintenance of the integrity of the curricula, resources, facilities, finances, equipment and evaluation requirements.

G. Submission of required annual reports about the BLS Competency-based Education Approved Program to the OEMS by the program ~~director~~ coordinator on forms provided by the OEMS. Attachment F.

> **Comment [DTA28]:** Again would like to see these Attachments.

I did not receive the attachments.

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has

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at least 2 years

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, EMT-Instructor certification or equivalent/greater and adequate this is not definable[GSN1] academic preparation and experience for the position.

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coordinator

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also have

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as provided by OEMS. The individual should demonstrate a knowledge and experience

Page 7: [9] Comment [DTA14]	Deborah T. Akers	7/19/2008 11:00:00 AM

Do we want to structure this section more like the ALS accreditation packet. Do we see a need for Course Coordinator, Faculty, Clinical Coordinator, Field Preceptor definitions and job descriptions?

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who has a minimum of one year patient care experience plus a minimum of one year experience instructing and evaluating EMT-B students

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coordinator

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curriculum

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program approved Instructor who shall be at a minimum of EMT-B certified or equivalent license/certification subject matter expert.

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Each EMT-B course shall be taught by an EMT-B certified instructor, or a probationary instructor under the supervision of an EMT-B instructor, who has met the requirements in 12 VAC 5-31. Include a copy of the EMT-B instructor(s) approval and/or documentation attesting to the fact from the coordinator and/or medical director that all instructors are appropriately credentialed to instruct. If you put this in it nullifies half the need for accreditation from a program point.

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Field Training Internship Coach We call ours

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field training Internship coach

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shall

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have documented certification or licensure for at least ~~2 years~~ 1[DTA2] year to perform the skills, preceptor education, experience and privileges for the field and clinical skills being ~~supervised and~~ evaluated.

Page 7: [33] Comment [DTA17]	**Deborah T. Akers**	**7/19/2008 10:35:00 AM**

Is asking for 2 years experience going to cause a hardship for anyone? The Clinical Coordinator needs to have an indepth understanding of what clinical skills we are trying to accomplish. Also, are we just talking about Coordinating the experience or was this intended to be the field preceptors? I'm confused on this part. If it is in fact the field preceptors; I don't think we call it Clinical Coordinator. Those are two distinctly different roles.

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~~(One (1) student to six (6) instructors ratio shall be the goal for education programs)~~

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We can't have coaches in the field/ambulance as we have AICs already scheduled. Need to eliminate ratio and direct supervision for ambulance ride time. Our ERs don't allow multiple students with a preceptor. Students are monitored by the AIC or Tech.

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Describe the sources of financial support required to conduct the BLS education program. ~~If a new program, the last year's budget is not applicable)~~
Doesn't belong here

~~Attach a copy of the BLS education program budget for the last and next fiscal years.~~
VCCS budget for BLS are not this straight forward. How can we reword?

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Page 7: [42] Comment [DTA18]	Deborah T. Akers	7/19/2008 10:40:00 AM

If an accredited institution applies for multiple sites, will we allow that institution to keep all the records and program files at one central location rather than at each individual location that the classes are being held at?

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If utilized, d

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established

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and

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~~and organized study groups~~

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;

I don't believe we can enforce study groups outside of class hours.

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evaluation tools used to determine student success or failure during program. Describe methods used to develop these

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Are students evaluated using written exams, practical skills demonstrations, role playing scenario tests, or a combination ~~of the above~~. Indicate if the written and skill exams are objective based. If not, indicate how student success is measured;

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how

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to the student,

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if it is in writing and if action plans for improvement are developed with student and program director/coordinator participation; Provide

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